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POWER OF ATTORNEY OR REVOCATION OF POWER OF ATTORNEY WITH A NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10/612,121
	Filing Date	July 2, 2003
	First Named Inventor	Jamie L. Brewer et al
	Title	Compositions and Methods for the Detection of Human T Cell...
	Art Unit	1644
	Examiner Name	Amy E. Juedes
	Attorney Docket Number	602330/00001

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint Practitioner(s) associated with the following Customer Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:

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OR

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Practitioner(s) Name	Registration Number

Please recognize or change the correspondence address for the above-identified application to:

☐ The address associated with the above-mentioned Customer Number.

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☒ The address associated with Customer Number:

27036

OR

<input checked="" type="checkbox"/> Firm or Individual Name	Michael T. Smith, Esq. Steptoe & Johnson PL				
Address	P.O. Box 2190				
City	Clarksburg	State	WV	Zip	26302-2190
Country	US				
Telephone	(304) 624-8000	Email	mike.smith@steptoe-johnson.com		

I am the:

☒ Applicant/Inventor.

OR

☐ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) (Form PTO/SB/96) submitted herewith or filed on _____.

SIGNATURE of Applicant or Assignee of Record

Signature	<i>Jamie L. Brewer Miller, Ph.D.</i>	Date	4-14-09
Name	Jamie L. Brewer	Telephone	
Title and Company			

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.☒ *Total of 2 forms are submitted.

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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OR

<input checked="" type="checkbox"/> Firm or Individual Name	Michael T. Smith, Esq. Steptoe & Johnson PL		
Address	P.O. Box 2190		
City	Clarksburg	State	WV Zip 26302-2190
Country	US		
Telephone	(304) 624-8000	Email	mike.smith@steptoe-johnson.com

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SIGNATURE of Applicant or Assignee of Record

Signature	<i>Solveig G. Ericson</i>	Date	4-16-09
Name	Solveig G. Ericson	Telephone	862-778-2014
Title and Company	Sr. Director Novartis Pharm Corp		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

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